	Please type a plus sign (+) inside t	his box						
	UTILITY	UTILITY		No.	JBP0584			
	PATENT APPLICAT				Warren Wallo, et al.			
	TRANSMITTA	L	Title		METHOD FOR MEASURING CHANGES IN PORTIONS OF HUMAN BODY			
322	(only for new nonprovisional applications under 37 CFR Express Mail La			bel No.	.s			
S. S.		NTS		ADD	ORESS TO: Commissioner for Patents o			
"	See MPEP Chapter 600 concerning utility	y patent appli	cation contents.	23	Box Patent Application Washington, DC 20231			
	1.	e.g., PTC ate for fee pr entity sta ges 33] below) nvention ted Applic d sponsor isting, a ta g appendit tion vention Drawings (e 3) [Total [Total riginal or c olication (a with Box 1 VENTOR attached of d) (c) and See 37 TION, check attached of d) (c) and See 37 TION, check attached of d) (c) and See 37 TION, check continus tion and i been inady 19. C de Label ion, Esq. inson & Johnson	o/SB/17) occssing) tus. ations ed R&D ble, or a (if filed) Sheets5] Pages4] opy) 7 CFR 1.63(d)) 8 completed) (S) teleting or application, 1.33(b). CFR 1.76 ck appropriate be ation Data Sheet uation-in-Part (or Sonly: The eight is considered sheetby incompleted or retently ormitte ORRESPOND 000027777 on Plaza 33-7003 US TELEPHON faxes to And	Box Patent Application Washington, DC 20231 7. □ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. □ Computer Readable Form (CRF) b. □ Specification Sequence Listing on: i. □ CD-ROM or CD-R (2 copies); or ii. □ paper c. □ Statement verifying identity of above copies ACCOMPANYING APPLICATION PARTS 9. ☑ Assignment Papers (unexecuted) 10. □ 37 CFR 3.73(b) Statement □ Power of Attorney (when there is an assignee) 11. □ English Translation Document (if applicable) 12. □ Information Disclosure Statement (IDS)/PTO-1449 □ Copies of IDS Citations 13. □ Preliminary Amendment 14. ☒ Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. □ Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. □ Request and Certifications under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. □ Other				
ŀ	Telephone: (732) 524-2792 Fax: (732) 524-2808 21. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED							
t	NAME Andrea L.	Reg. No. 30194						
		er L	Call					
	DATE February	19, 2002						

FEE TRANSMITTAL

Complete if Known					
Application Number					
Filing Date					
First Named Inventor	Wallo Warren, et al.				
Group Art Unit					
Examiner Name					
Attorney Docket Number	JBP0584				

FEE CALCULATION

CLAIMS AS FILED

(1)	(2)	(3)	(4)	(5)
FOR:	NUMBER FILED	NUMBER EXTRA	RATE	BASIC FEE \$740.00
TOTAL CLAIMS	6 - 20 =	0	x 18.00	\$ 0.00
INDEPENDENT CLAIMS	1 - 3 =	0	× 84.00	\$ 0.00
MULTIPLE DEPENDENT CLAIMS		N/A	\$280.00	
		TOTAL FEES	\$ 740.00	

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